

104

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation Grow PAC		3. FEC Identification Number 000490292
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 28 West 44th Street		
(c) City, State and ZIP Code New York, NY 10036		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

11030540846

4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year-End Report
- 24-Hour Report
- 48-Hour Report

b) Is this Report an amendment? Yes No

5. COVERING PERIOD: FROM

10 21 2010
THROUGH
12 31 2010

6. TOTAL CONTRIBUTIONS.....

175000

7. TOTAL INDEPENDENT EXPENDITURES

2422727

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

David Malpass

1-13-11

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

**SCHEDULE 5-A
ITEMIZED RECEIPTS**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF FILER (In Full)

A. Full Name (Last, First, Middle Initial)
 Blum, Andrew M. Filing (12022190174)
Date of Receipt
 11 02 2010
Mailing Address
 910 Park Avenue, 16th Fl.
City State Zip Code
 New York NY 10022
Amount of Each Receipt this Period
 250.00
FEC ID number of contributing federal political committee.
 C00490292

Name of Employer Occupation
 CL King = Associates Managing Director
B. Full Name (Last, First, Middle Initial)
 Smith, Randall F.
Date of Receipt
 12 08 2010
Mailing Address
 325 East 53rd Street #3
City State Zip Code
 New York NY 10022
Amount of Each Receipt this Period
 1000.00
FEC ID number of contributing federal political committee.
 C00490292

Name of Employer Occupation
 Capital Counsel LLC, Investment Adviser
C. Full Name (Last, First, Middle Initial)
 Bell, Stephen
Date of Receipt
 10 25 2010
Mailing Address
 1253 Dartmouth Court
City State Zip Code
 Alexandria VA 22314
Amount of Each Receipt this Period
 5000.00
FEC ID number of contributing federal political committee.
 C00490292

D. Full Name (Last, First, Middle Initial)
Date of Receipt
Mailing Address
City State Zip Code
Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.
 C
Name of Employer Occupation

SUBTOTAL of Receipts This Page (optional)	1750.00
TOTAL This Period (last page carry total to Line 6)	1750.00

11030540847

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 3 OF 4
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

11030540848

Full Name (Last, First, Middle Initial) of Payee Donehue Direct		Date 11 23 2010
Mailing Address PO Box 7431		Amount \$000.00
City Columbia, SC	State Zip Code SC 29202	
Purpose of Expenditure Internet	Category/Type	Office Sought: House Senate President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee In The field Consulting LLC		Date 11 09 2010
Mailing Address 77 Lexington Drive		Amount 11,127.27
City Croton-on-Hudson, NY	State Zip Code 10520	
Purpose of Expenditure Advertising	Category/Type	Office Sought: House Senate President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Donehue Direct		Date 10 25 2010
Mailing Address PO Box 7431		Amount 2000.00
City Columbia, SC	State Zip Code 29202	
Purpose of Expenditure Internet	Category/Type	Office Sought: House Senate President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	2000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	17127.27
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	2000.00

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 4 OF 4
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

11030540849

Full Name (Last, First, Middle Initial) of Payee The Casale Group		Date 10 25 2010
Mailing Address 29 Pioneer Street		Amount 3000.00
City Cooperstown	State Ny	
Zip Code 13326		
Purpose of Expenditure Advertising	Category/Type	Office Sought: House _____ Senate _____ President _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: Support _____ Oppose _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary _____ General _____ Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee TALK BOO		Date 10 21 2010
Mailing Address 51 South Pearl Street		Amount 4100.00
City Albany	State Ny	
Zip Code 12207		
Purpose of Expenditure Advertising	Category/Type	Office Sought: House _____ Senate _____ President _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: Support _____ Oppose _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary _____ General _____ Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee		Date
Mailing Address		Amount
City	State	
Zip Code		
Purpose of Expenditure	Category/Type	Office Sought: House _____ Senate _____ President _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: Support _____ Oppose _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary _____ General _____ Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	17127.27 ^{RS3}
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	7100.00 ^{TRSP}
(c) TOTAL Independent Expenditures.....▶ (carry total from last page forward to Line 7)	24227.27

**Federal Election Commission
 ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

11030540850

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked Delivery Confirmation™ Label <input type="checkbox"/>
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

The document preceding this page was received by FAX at the FEC. The receiving FAX machine has printed at the bottom of each page the date and time of receipt, the phone number of the transmitting machine and the sequential page numbers.

N/A
 PREPARER

N/A
 DATE PREPARED